

BEST AVAILABLE COPY

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)**

SERIAL NO. **09/720285**
FILING DATE
APPLICANT(S)

AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		CLAIMS						
IND.	DEP.	IND.	DEP.	IND.	DEP.		INC.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.	13											
TOTAL DEP.	8											
TOTAL CLAIM	21											
PTO-12	(3-78)											
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